							Application or Docket Number							
PATENT APPLICATION FEE DETERMINATION RECOF								09/750311						
CLAIMS AS FILED - PART I								SMALL ENTITY				OTHER THAN		
(Column 1) (Column					mn 2)	TYPE			OR	SMALL	l l			
TOTAL CLAIMS							RA	ΓE	FEE		RATE	FEE		
FOR			NUMBER FILED NUMI			ER EXTRA	BASIC FEE		370.00	OR	BASIC FEE	740.00		
TOTAL CHARGEABLE CLAIMS			53 minus 20= * 33			3	X\$ 9=			OR	X\$18=	594.		
INDEPENDENT CLAIMS			3 minus 3 = *			X4:	2=		OR	X84=				
MU	LTIPLE DEPEND	DENT CLAIM PE	RESENT				+14	+140=			7 +280=	27>		
* If the difference in column 1 is less than zero, enter "0" in column 2							TOT			OR OR	TOTAL	X ((),		
8.	8-4-03 CLAIMS AS AMENDED - PART II										OTHER	THAN		
	(Column 1) (Column 2) (Column 3)					SMA	\LL	ENTITY	OR	SMALL				
ENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA	RA	ΓE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
Z D M	Total	* 18	Minus	**	53	=	X\$	9=		OR	X\$18=	·		
AMENDMENT		* 2	Minus	***	3	=	X42	2=		OR	X84=			
	FIRST PRESEN	NTAȚION OF MI	ULTIPLE DEP	ENDEN	T CLAIM		+14	0=.		OR	+280=			
γ	7							OTAL		OR	TOTAL			
(Column 1) (Column 2) (Column 3)							ADDIT.	FEE		,	ADDIT. FEE			
		CLAIMS REMAINING		HIG	HEST MBER	PRESENT EXTRA			ADDI-			ADDI-		
11.		AFTER AMENDMENT		PREV	/IOUSLY D FOR		RA	TE	TIONAL FEE		RATE	TIONAL FEE		
AMENDMENT	Total	* 18	Minus	**	53	=	X\$	9=		OR	·X\$18=			
AME	Independent	* 2	Minus	*** (<u>3</u>	=	X4:	2=		OR	X84=			
FIRST PRESENTATION OF MULTIPLE DEPENDENT C				·		+14	0=		OR	+280=				
		,					T(ADDIT	OTAL		OR	TOTAL ADDIT. FEE			
7	-16-04	(Column 1)		(Colu	ımn 2)	(Column 3)				•	ADDITITEE			
O		CLAIMS REMAINING		HIG	HEST MBER	PRESENT			ADDI-			ADDI-		
11.		AFTER AMENDMENT		PREV	IOUSLY D FOR	EXTRA	RA	TE_	TIONAL FEE		RATE	TIONAL FEE		
AMENDMENT	Total	*	Minus	** [53	=	X\$	9=		OR	X\$18=			
NE NE	Independent	*	Minus	***	3	=	X4	2=		OR	X84=			
Ľ	FIRST PRESE	NTATION OF M	IULTIPLE DEF	PENDEN	IT CLAIN	1		^			+280=			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.							+14	0= OTAL		OR	TOTAL			
**	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."						ADDIT	FEE		OR	ADDIT. FEE			
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.														

PATENT APPLICATION FEE DETERMINATION RECORD								Application or Docket Number					
	Effective October 1, 2001												
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER SMALL		
ТО	TAL CLAIMS	.]	(Column 1)				RAT	E	FEE	OR	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASIC			OR	BASIC FEE	·	
TO	TAL CHARGEAE	BLE CLAIMS	minus 20=		*		X\$ 9=			OR	X\$18=		
INDEPENDENT CLAIMS			minus 3 =		*		X42=			OR	X84=		
MU	LTIPLE DEPEN	DENT CLAIM PF	RESENT	•	Į		1140						
* f	the difference i	in column 1 is l	less than zero, enter "0" in column 2			+140=			OR	+280=			
* If the difference in column 1 is less than zero, enter "0" in column 2 TOTAL OR TOTAL I (-) (-) (-) CLAIMS AS AMENDED - PART II OTHER T									ΤΗΔΝ				
O_{i}		(Column 1)			mn 2)	(Column 3)	SMA	LL I	ENTITY	OR	SMALL		
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NDM	Total	* 1/	Minus	** {	53	=	X\$ 9)=		OR	X\$18=		
ME	Independent	*	Minus	*** \	3	=	X42	=	÷	OR	X84=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+140)= .		OR	+280=		
								TAL		OR	TOTAL ADDIT. FEE		
	(Column 1) (Column 2) (Column 3)									s ■			
ENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
ΜQ	Total	*	Minus	**		=	X\$ 9) =		OR	X\$18=		
AMENDMENT	Independent	*	Minus	***		=	X42	=		OR	X84=		
	FIRST PRESE	ULTIPLE DEPENDENT CLAIM				+140)=		OR	+280=			
						TO	TAL		OR	TOTAL			
		(Column 1)	(Column 2) (Column 3)			ADDIT.	FEE		1	ADDIT. FEE			
ENT C		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIG NUI PREV	HEST MBER YOUSLY D FOR	PRESENT EXTRA	RAT	Έ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
DME	Total	*	Minus	**		=	X\$ 9)=		OR	X\$18=		
AMENDMENT	Independent	*	Minus	***	,	=	X42	<u> </u>		OR	X84=		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								1	+280=			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. * TOTAL								OR	TOTAL				
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ADDIT. FEE ADDIT. FEE													
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													